DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10006366-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which

METHOD	AND	SYSTEM	FOR	HANDLING	COMPUTER	RESOURCE	REQUESTS	ON	Α	MONETARY
PRIORITY	BASIS	5								

a patent is sought on the inve		•	•			
METHOD AND SYSTEM F PRIORITY BASIS	OR HANDLING	COMPUTER	RESOURCE	REQUESTS	ON	A MONETAR
the specification of which is	attached hereto i	unless the follo	owing box is	checked:		
() was filed on			•		ailaaA	ation
Number		amended on				
I hereby state that I have reincluding the claims, as ame disclose all information which	nded by any ame	endment(s) re	ferred to abo	ve. Lacknov	tified : w ledge	specification, the duty to
Foreign Application(s) and/or Claim of I hereby claim foreign priority benefinventor(s) certificate listed below at a filing date before that of the application.	its under Title 35, Ur nd have also identified	d below anv forei	e Section 119 of gn application fo	any foreign app r patent or inver	olication ntor(s) c	(s) for patent or pertificate having
COUNTRY	APPLICATION NUM	1BER	DATE FILED	PRIORITY CLAI	MED UND	ER 35 U S.C. 119
				YES:		NO
				YES:		NO.
Provisional Application I hereby claim the benefit under Titl below:	e 35, United States (Code Section 119	e) of any Unite	d States provisi	onal app	olication(s) listed
			712.11.0 57.11.0			
				 		
information as defined in Title 37, Coapplication and the national or PCT in APPLICATION NUMBER	ode of Federal Regula					date of the prior
POWER OF ATTORNEY: As a named inventor, I hereby app business in the Patent and Trademar	oint the following at k Office connected th	ttorney(s) and/or nerewith:	agent(s) to pros	secute this appl	ication	and transact all
Customer Numbe	er 022879		Place Customer lumber Bar Code Label here			
Send Correspondence to: HEWLETT-PACKARD COMPANY			Direct Telepho	one Calls To:		
Intellectual Property Administrati	James R. McDaniel					
P.O. Box 272400 Fort Collins, Colorado 80527-24		(208) 396-4095				
I hereby declare that all state made on information and be with the knowledge that w imprisonment, or both, under false statements may jeopard	elief are believed fillful false state r Section 1001 o	to be true; au ments and th of Title 18 of t	nd further tha ne like so ma the United St	at these state ade are pun ates Code ar	ements ishable ad that	s were made e by fine or t such willful
Full Name of Inventor: <u>Jeffrey Sc</u>	ott Weaver		Citizenship։ <u>Մ</u>	SA		
Residence: 4306 Revere Court, Fort Collins, CO 80525						
Post Office Address: Same As			8-16	-01	······	01-01

Date

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10006366-1

	Full Name of # 2 joint inventor: David Joe Luman Citizenship: USA						
	Residence:	2577 W. Wave Court, Meridian,					
	Post Office Address:	Same As Above					
	X amillada	- and a second	4-	28- 200/			
	Inventor's Signature / //		Date				
	Full Name of # 3 joint inventor:			Citizenship:			
	Residence:		· · · · · · · · · · · · · · · · · · ·				
	Post Office Address:						
	Inventor's Signature						
	involtor o olgrature		Date				
	F. II.N						
	Full Name of # 4 joint inventor:			Citizenship:			
	Residence:						
	Post Office Address:						
	Inventor's Signature		Date				
Har							
	Full Name of # 5 joint inventor:	:		Citizenship:			
D L	Residence:			OKESHONIP.			
	Post Office Address:						
			·				
	Inventor's Signature	***************************************	Date				
	Full Name of # 6 joint inventor:	4		Citizenship:			
	Residence:						
	Post Office Address:						
	Inventor's Signature	The state of the s					
i			Date				
	Full Name of # 7 joint inventor:						
	•	;		Citizenship:			
	Residence:						
	Post Office Address:		,				
	Inventor's Signature		Date	To the state of th			
	Full Name of # 8 joint inventor:			Citizenship:			
	Residence:			•			
	Post Office Address:						
	Inventor's Signature		Date				